

Revision: HCFA-PM-87-4 (BERC)  
MARCH 1987

OMB No.: 0938-0193

State/Territory: DELAWARE

Citation

42 CFR 431.800(c)  
50 FR 21839  
1903(u)(1)(D) of  
the Act,  
P.L. 99-509  
(Section 9407)

4.4 Medicaid Quality Control

- (a) A system of quality control is implemented in accordance with 42 CFR Part 431, Subpart P.
- (b) The State operates a claims processing assessment system that meets the requirements of 431.800(e), (g), (h), and (k).

☒ Yes.

☐ Not applicable. The State has an approved Medicaid Management Information System (MMIS).

TN No. SP-250  
Supersedes  
TN No. SP-228

Approval Date DEC 23 1987 Effective Date 7/1/87

HCFA ID: 1010P/0012P